

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	BZ	443 897	3/9/01 03-19-01
RESPONSE FORMALITY REVIEW	MO	J911	03/19/01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	3/12/01
2	✓	✓	3/12/01
3	✓	✓	3/12/01
4	✓	✓	3/12/01
5	✓	✓	3/12/01
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8		✓	✓
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10		✓	✓
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12		✓	✓
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14	✓	✓	✓
15	N	N	N
16	N	N	N
17	✓	✓	✓
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here